PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

C-2765

CLAIMS AS FILED - PART I (Column 1)						mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			3				RA	ΓE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			3 minus 20=		* Ø		X\$	9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* Ø		X4:	2=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PI			RESENT				+14	0=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in column 2		TOT	AL		OR	TOTAL	750
	С	LAIMS AS A	- PAR	- PART II				,		OTHER	THAN	
		(Column 1)	(Colun				SMALL ENTITY			QR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA ⁻	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus *** F MULTIPLE DEPENDEN		CL AINA	=	X42=			OR	X84=	
	FIRST PRESE	INTATION OF MI	JLI (PLE DEF	ENDEN	CLAIM		+14	0=		OR	+280=	
								OTAL.		00	TOTAL	
		(Column 1)	:	· (Colur	mn 2)	(Column 3)	ADDIT.	FEE!			addit. Fee	
_		CLAIMS		HIGH	EST	1 1 1 1	Г		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	E	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	X\$:	9=		OR	X\$18=	
	Independent	*	Minus	***]=	X42	?=		OR	X84=	
	FIRST PRESE	NTATION OF M	DETIPLE DEF	ENDENT	CLAIM		+14	0=		OR	+280=	
							TC ADDIT.	TAL		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	nn 2)	(Cölumn 3)	ADDII.				7.0011.1 CE	
AMENDMENT C		CLAIMS		HIGH	EST	1			ADDI-	1		ADDI-
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	Ε	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=	
	Independent	*	Minus	***		=	X42				X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						^42	.=		OR	A04=	
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Pa					found in th	e ani	propriate box	in co	umn 1	